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ABSTRACT

There is growing evidence that the stress of caring for a relative with Alzheimer's disease may have adverse effects on the caregivers. This study was conducted to explore the mental health consequences of caregiving. Psychological data and mental health status information were obtained from 50 Alzheimer's disease spousal caregivers and from 50 category matched (age, sex, and socioeconomic status) comparison subjects. The results revealed that caregivers had significantly higher rates of depressive disorder while caregiving than the comparison subjects during the same period. Additionally, caregivers had significantly higher current dysphoria as measured by the Hamilton Depression Rating Scale (p .001). The data suggest that certain chronic stressors may be linked to the onset of depressive disorder. As the population continues to age and the number of Alzheimer's disease patients increases, family caregivers may become an increasingly important risk group. (Author/NB)

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Psychiatric Sequelae of Chronic Stress in the Elderly: An Exploration of Alzheimer's Disease Caregivers

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There is growing evidence that the stress of caring for a relative with Alzheimer's Disease (AD) may have adverse effects on the caregivers. In order to better understand the mental health consequences of caregiving, we obtained psychological data and mental health status information from 50 AD family caregivers and 50 category matched (age, sex, and socioeconomic status) comparison subjects. Caregivers had significantly higher rates of depressive disorder while caregiving than the comparison subjects during the same period. Additionally, caregivers had significantly higher current dysphoria as measured by the Hamilton Depression Rating Scale ($p>.001$). The data suggest that certain chronic stressors may be linked to the onset of depressive disorder. As the population continues to age and the number of AD patients increase, family caregivers may become an increasingly important risk group.

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Data from several laboratories suggest that the stresses of caring for a family member with progressive dementia may leave caregivers at high risk for depression. There is good evidence that caregivers are more likely to become isolated from their usual companions and social activities because of the time demands than individuals without comparable responsibilities and this often increases their sense of burden. Since the modal age of onset of AD is 65-69, AD caregivers are themselves most often middle-aged or elderly. Thus, the presence of caregiving as a burden may be added to pre-existing stress secondary to health problems and/or changes in employment status. For the present investigation it was hypothesized that the stress of caregiving would give rise to greater cumulative incidence of depressive disorders among caregivers than would be found in comparable older adults who do not care for a demented family member. In addition, the depressive symptoms at the subsyndromal level were expected to be greater among caregivers than noncaregivers.

METHOD

Subjects

Subjects for the present investigation included 50 progressive dementia spousal caregivers and 50 socio-demographically-matched comparison subjects. Caregivers included 21 males and 29 females (mean age=66.0 years, range 43-87 years). Comparison subjects included 21 males and 29 females (mean age=64.1 years, range 48-84). The mean educational attainment for caregivers and comparison subjects was partial college.

Procedure

Caregivers were recruited from local Alzheimer's Association and Parkinson's Society support groups and local dementia evaluation centers. Comparison subjects were recruited through newspaper advertisements. Interviews were done by advanced graduate students in clinical psychology or the first author. All subjects were paid $20. for completing the interview. Caregivers and comparison subjects were individually matched on sex, age and level of education. The diagnostic interview provided current and lifetime incidence of affective disorders with the approximate date(s) of onset noted. For caregivers, onset of caregiving was noted so that a determination could be made as to whether the disorder(s) began during caregiving. For comparison subjects, the onset date of caregiving for their matched caregiver was used to determine if they (the comparison subject) had had an affective disorder during the time period their matched caregiver was caregiving.

Psychiatric and Mental Status Data

The Structured Clinical Interview for DSM-III-R, nonpatient version (SCID-NP) is designed to enable a clinically-trained interviewer to make reliable and valid DSM-III-R diagnoses. Interview questions are arranged so that diagnostic criteria may be reviewed in the model of the DSM-III-R diagnostic decision trees.

The Hamilton Depression Rating Scale (HDRS). This is a 24-item, interviewer-rated measure of depression. The HDRS is the

most common interview measure of depression. The HDRS is reliable within various settings, and reliably differentiates depressed individuals from nondepressed persons.

Results

Results are presented in Table 1. Twenty-six percent of caregivers had had a depressive disorder while caregiving, compared to 2% of comparison subjects. Eight percent of caregivers had Major Depressive Disorder while caregiving, compared to 2% of comparison subjects. Similarly, 16% of caregivers had dysthymic disorder and 2% have had depressive disorder not otherwise specified, compared to zero incidence of either disorder among comparison subjects. Additionally, caregivers had significantly higher current dysphoria as measured by the Hamilton Depression Rating Scale (t=5.04, p<.0001).

Discussion

This study's results support the hypothesis that caregiving is related to significant distress. Caregivers demonstrated significantly more syndromal depression and more depressive symptoms than matched community dwelling comparison subjects. In addition, caregivers' incidence of depression is much higher than reports from epidemiological surveys of the community at large, while the number of cases among comparison subjects is comparable to base rates.

Table 1

Number of subjects with Depressive Disorders and Hamilton Depression Rating Scale Score by Group_

	Caregivers	Comparison Subjects
Major Depressive Disorder	4	1
Dysthymic Disorder	8	0
Depressive Disorder NOS	1	0
Hamilton Depression Rating		
Scale Mean Score	7.3	1.8
SD	7.2	2.6
Range	0 - 28	0 - 10